

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO	FILED DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	
1	1						51		1			
2		1					52		1			1
3							53		1			
4		1					54		1			
5		1					55		1			
6							56		1			
7		1					57		1			
8							58					
9		1					59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17		1					67					
18							68					
19		1					69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29	1						79					
30	1						80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48		1					98					
49		1					99					
50		1					100					
TOTAL IND.							TOTAL IND.	3				
TOTAL DEP.							TOTAL DEP.	19				
TOTAL CLAIMS							TOTAL CLAIMS	20				